

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

63-031981

STATE FILE NUMBER

Registration District No. 128 Primary Registration District No. 2000 Registrar's No. 1250

DO NOT WRITE
ON THIS STUB

AMENDED

FILED SEP 12 1963

1. PLACE OF DEATH a. COUNTY Greene		2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission) a. STATE Missouri b. COUNTY Greene	
b. CITY (If outside corporate limits, give TOWNSHIP only) OR TOWN Springfield		c. CITY OR TOWN Springfield	
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION St. Johns Hospital		d. STREET ADDRESS (If outside, give location) RFD#12	
3. NAME OF DECEASED (Type or print) First James Middle Clarence Last Potts		4. DATE OF DEATH Month September Day 4 Year 1963	
5. SEX Male	6. COLOR OR RACE White	7. Married <input checked="" type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	8. DATE OF BIRTH 2/14/1876
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Live Stock Dealer		10b. KIND OF BUSINESS OR INDUSTRY Retired	9. AGE (last birthday) 87
11a. FATHER'S NAME Lewis Potts		11b. MOTHER'S MAIDEN NAME Tennessee Eoff	12. CITIZEN OF WHAT COUNTRY USA
13a. FATHER'S NAME Lewis Potts		14. NAME OF HUSBAND OR WIFE Maude Potts	
15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) No		16. SOCIAL SECURITY NO. Maude Potts (Wife) Rt. 12 Springfield, Mo.	
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c). PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Cerebral Thrombosis DUE TO (b) Cerebral Arteriosclerosis DUE TO (c) None PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a) None			INTERVAL BETWEEN ONSET AND DEATH 2 day 3 yrs
19. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		20a. ACCIDENT SUICIDE HOMICIDE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)		20c. TIME OF INJURY Hour 11:24 Month, Day, Year October 1963	
20d. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input checked="" type="checkbox"/>		20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)	
20f. CITY, TOWN, OR LOCATION Springfield, Missouri		20g. COUNTY Greene STATE Missouri	
21. I attended the deceased from October 1963 to 9/4/63 and last saw him alive on 9/4/63 Death occurred at 11:24 A.M. on the date stated above, and to the best of my knowledge, from the causes stated.		22a. SIGNATURE (Degree or title) J. P. Maden M.D.	
22b. ADDRESS 609 Cherry Springfield, Missouri		22c. DATE SIGNED 9-5-63	
23a. BURIAL, CREMATION, REMOVAL (Specify) Burial	23b. DATE 9/7/63	23c. NAME OF CEMETERY OR CREMATORY White Chapel Cemetery	
23d. LOCATION (City, town, or county) Springfield, Mo.		23e. STATE Missouri	
24. FUNERAL DIRECTOR Klingner Funeral Home		25. DATE RECD. BY LOCAL REG. 9-9-63	
26. REGISTRAR'S SIGNATURE Bernie Medley		27. ADDRESS Springfield, Mo.	

USE BLACK INK

OR TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

INSTEAD OF

SHOULD READ

DOCUMENT

BY AFFIDAVIT OF

MEDICAL CERTIFICATION

1hc

(Licensed Embalmer's Statement on Reverse Side)

SEP 12 1963

3
9-5-6

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,
or by _____, Student Embalmer No. _____
working under my personal supervision.

Student _____
Signature of Student Embalmer

Signed John R. Khazian Jr

Licensed Embalmer No. 5102

P. O. Address Springfield

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).
If embalmed by a STUDENT, he also shall sign in his OWN handwriting.
If this body is not embalmed, fact should be so stated above.